

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Majority PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484642	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>FUSE</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 10 / 2016</b>	
Mailing Address <b>802 N 1st St</b>		Amount <b>206050.00</b>	
City <b>Saint Louis</b>	State <b>MO</b>	Zip Code <b>63102-2529</b>	Transaction ID : <b>VN7GBA552R3</b>
Purpose of Expenditure <b>Media Buy</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate <b>McGinty, Kathleen, A., ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>13429122.12</b>		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>PA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>FUSE</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 10 / 2016</b>	
Mailing Address <b>802 N 1st St</b>		Amount <b>206050.00</b>	
City <b>Saint Louis</b>	State <b>MO</b>	Zip Code <b>63102-2529</b>	Transaction ID : <b>VN7GBA552S1</b>
Purpose of Expenditure <b>Media Buy</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate <b>Clinton, Hillary, Rodham, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>639843.06</b>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>412100.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Lambe, Rebecca, ,*

[Electronically Filed]

Date

 MM / DD / YYYY  
**10 / 12 / 2016**

Signature